



3739
870

CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Mail Stop
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450**

on 3/22/05.

Laurie Delesandro
Laurie Delesandro

In Re Application of:

Jayaraman, et al.

Serial No.: 09/713,161

Filed: 11/14/2000

Confirmation No.: 3391

Group Art Unit: 3739

Examiner: Cohen, Lee

Docket No.: 820701-1121

For: A Novel Fabric-Based Sensor for Monitoring Vital Signs

The following is a list of documents enclosed:

Return Postcard
Response
Petition for Extension of Time
Amendment Transmittal

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

AMENDMENT TRANSMITTAL LETTER (SMALL)

Applicant(s):

MAR 28 2005

Docket No.

820701-1121

Serial No.
09/713,161

Filing Date
November 14, 2000

Examiner
Lee S. Cohen

Confirmation No.
3391

Group Art Unit
3739

Invention: **A Novel Fabric-Based Sensor For Monitoring Vital Signs**

Commissioner for Patents
Mail Stop Amendmnt
P.O. Box 1450
Alexandria VA 22313-1450

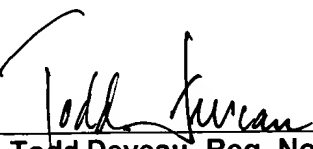
Transmitted herewith is and Amendment and Response to Office Action in the above-identified application.

The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	230 -	33 =	0	X \$9.00	\$0
INDEP. CLAIMS	3 -	3 =	0	X \$43.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$145.00	\$
EXTENSION FEE	1 ST MONTH <input type="checkbox"/> 60.00	2 ND MONTH <input checked="" type="checkbox"/> 225.00	3 RD MONTH <input type="checkbox"/> 510.00	4 TH MONTH <input type="checkbox"/> 795.00	\$225.00
Other Fees:					\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$225.00

- ☐ No additional fee is required.
- ☒ Please charge Deposit Account No. 20-0778 in the amount of 225.00.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed.
- ☐ A Credit Card Payment Form PTO-2038 is attached in the amount of \$ _____.
- ☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.


Todd Deveau, Reg. No. 29,526

22 March 2005
Date